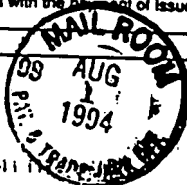


# PART B—ISSUE FEE TRANSMITTAL

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advances orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

## 1. CORRESPONDENCE ADDRESS

MJD  
 MERCHANT, GOULD, SMITH,  
 EDSELL, WEITER & SCHMIDT  
 1000 NORTHWEST CORNER  
 SAINT PAUL, MINNESOTA 55101



## 2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME  
 Street Address  
 City, State and ZIP Code  
 CO-INVENTOR'S NAME  
 Street Address  
 City, State and ZIP Code

☐ Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
100 MG 08/04/94 08000264	08/04/94	1	142	08/04/94

TITLE OF INVENTION  
 ADHESIVE LABEL

9-15-94 F Drw Due  
 10-15-94 Issue Fee

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPL. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
100 MG 08/04/94	01 01	1	1		142	08/04/94

## 3. Correspondence address change (Complete only if there is a change)

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

Merchant, Gould, Smith,  
 Edsell, Weiter & Schmidt, P.A.

DO NOT USE THIS SPACE

100 MG 08/04/94 08000264  
 100 MG 08/04/94 08000264

142 1:170.00 CR  
 1 561 33.00 CR

## 5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:  
 Ecolab Inc.  
 (2) ADDRESS (CITY & STATE OR COUNTY):  
 St. Paul, Minnesota  
 (3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION:  
 Delaware

☐ This application is NOT assigned.  
☒ Assignment is being previously submitted to the Patent and Trademark Office.  
☐ Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

6a. The following fees are enclosed:  
☒ Issue Fee ☒ Advanced Order - # of Copies 11 (Minimum of 10)

6b. The following fees should be changed to:  
 DEPOSIT ACCOUNT NUMBER (ENCLOSED PART C)  
☐ Issue Fee ☐ Advanced Order - # of Copies (Minimum of 10)  
☐ Any Deficiencies in Enclosed Fees

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above

(Signature of party in interest or requestor) (Date)  
 [Signature] [Date]

NOTE: The Issue Fee will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

TRANSMIT THIS FORM WITH FEE CERTIFICATE OF MAILING ON REVERSE